Ohio Campaign Finance Report 05 DEC 15 PM 1: 35



		Prescribed by	Secretary of State	2 02/01		100	AANI Sa or	in ci	WAT	Ϋ́
Full Name of Committee						Registra	ition Nun	nber, if (P	ACIU	NS
CITIZENS FOR RANK	KIN									
Full Name of Candidate		-								
MIKE R. RANKIN										
Street Address				Office Sought				District		
545 EAST TOWN STRE	ET			JUDGE,	MUN	CIPAI	COU	FR∄	ANKL.	IN CC
City					S	tate	Zip Cod	е		
COLUMBUS					0	11	432	15		
Complete Control of the Control of t			Х						Annual	Year
Type of Report	Pre-Primary	Post-Primar	у 🗎 🗀	Pre-General	ŀ	Post-Ge	neral			
(place X to the left of report	ylut	August		September						
type)	Monthly	Monthly		Monthly	ŀ	Termina	ition			
Amended Report?	Report Elec	tronically filed?			"	М		D		Υ
XYes No		Yes X No	Date of	Election	1	I	()	8	0	5

For candidates only, during an election year: if total contributions and expenditures each total \$500 or less during the combined pre- and post-periods at one election, check box. No other forms are required at a post-primary or post-general period, if above statement applies. See R.C. 3517.10(H) for details.

1. Amount brought forward from last report		\$	4,966.80
2. Total monetary contributions (From Form No. 31-A)		\$	34,036.00
3. Total other income (From Form No. 31-A-2)		\$	411.64
4. Total funds available (sum of lines 1, 2, 3)		.	39,414,44
5. Total monetary expenditures (From Form No. 31-8)		\$	12,448.28
6. Balance on hand (line 4 minus line 5)		\$	26,966.16
7. Value of in-kind contributions received (From Form No. 31-J-1)		\$	6,019.33
8. Value of in-kind contributions made (From Form No. 31-1-2)		\$	0.00
9. Outstanding loans owed by committee (From Form No. 31-C)		\$	11,150.00
10. Outstanding debts owed by committee (From Form No. 31-N)		\$	2,201.11
11. Outstanding loans owed to committee (From Form No. 31-K)	i i	\$	0.00
12. Value of independent expenditures made (From Form No. 31-U)		\$	0.00
13. For Electronic Filing Entities only Sum of lines 2, 7 and amount of any new loans received this period		\$	

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THE INFORMATION CONTAINED IN THIS REPORT IS MADE UNDER THE PENALTY OF ELECTION FALSIFICATION. WHOEVER						
COMMITS ELECTION FALSIFICATION IS G	UILTY OF A FELONY OF THE FIFTH I	DEGREE	 			
LAURA T. RIGGS-KOLMA	AN, TREAS.	WAT. Rias Kolman	12-16-05			
Print Name and Title (Treasurer and Depu	ty Treasurer only) Signatu	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	Date			
Contribution	Expenditure	Other	Total			
pages 34	pages 2	pages 7	pages 43			
						

31	-J-	1	
R.C.	351	7.1	0

Page		
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In-Kind Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full						
CITIZENS FOR RANKIN	<u> </u>					
Full Name of Contributor	Employer, Occu	upation, Labor Organization *	* Registration Number, if PAC			
MIKE R. RANKIN			<u> </u>			
Street Address	Description of Item or Service		M D	Y Fair Market Value		
2432 WYNCOURTNEY COURT		GNETIC TAPE	0 6 2 0			
City	State	Zip Code	Received at Fund			
POWELL	$O \mid H$	43065	yes 🔀 yo			
Full Name of Contributor	Employer, Occu	ipation, Labor Organization *	Registration Num	ber, if PAC		
MIKE R. RANKIN			1			
Street Address	Description of I	Item or Service	M D	Y Fair Market Value		
2432 WYNCOURTNEY COURT		T-SHIRTS	0 6 2 3	0 5 101.85		
City	State	Zip Code	Received at Fund			
POWELL.	O + H	43065	res	No		
Full Name of Contributor	Employer, Occu	ipation, Labor Organization *	Registration Number, if PAC			
BILL HEDRICK		-				
Street Address	Description of I	tem or Service	м р	Y Fair Market Value		
838 THURBER DRIVE WEST	1 .	POSTAGE	016 3 0			
City	State	Zip Code	Received at Fund			
COLUMBUS	O H	43201	/ES	NO		
Full Name of Contributor	1.0	pation, Labor Organization *	Registration Num			
BILL HEDRICK	Linkiyer, occu	ipation, Laudi Organization	Registration num	iber, if PAC		
Street Address	Description of I	torn or Coming	1	[6-2-11. 23/-1		
838 THURBER DRIVE WEST	I '		M D	Y Fair Market Value		
		D, BEVERAGES	0 7 1 4			
City COLUMBUS	State	Zip Code	Received at Fund	(
Full Name of Contributor	O H	43201	rES	10		
	Employer, Occu	pation, Labor Organization *	Registration Num	ber, if PAC		
MIKE R. RANKIN			<u> </u>			
Street Address	Description of I		M D	Y Fair Market Value		
2432 WYNCOURTNEY COURT		POSTAGE	0 8 0 3			
City	State	Zip Code	Received at Fund	raising Event?		
POWELL	<u>O</u> H	43065	∕/ES	ИО		
Full Name of Contributor	Employer, Occu	pation, Labor Organization *	Registration Num	ber, if PAC		
MIKE R. RANKIN			<u></u>			
Street Address	Description of I	tem or Service	M D	Y Fair Market Value		
2432 WYNCOURTNEY COURT	Y.	ARD SIGNS	0 8 1 9	0 5 1,763.75		
City	State Zip Code		Received at Fund			
POWELL	O H	43065	rES	No		
Full Name of Contributor	Employer, Occu	pation, Labor Organization *	Registration Num	ber, if PAC		
MIKE R. RANKIN		· -	-			
Street Address	Description of It	tem or Service	M D	Y Fair Market Value		
2432 WYNCOURTNEY COURT	POSTAGE		0 9 2 6			
City	State	Zip Code	Received at Fund			
POWELL	ОН	43065	YES	No No		
Full Name of Contributor		pation, Labor Organization *	Registration Num			
MIKE R. RANKIN		puttori, Euror Organization.	Negration Ham.	bei, ii r Ac		
Street Address	Description of It	tem or Cenica	M D	V Tair Market Value		
2432 WYNCOURTNEY COURT	•	POSTAGE	1 1 1	Y Fair Market Value		
City				0 5 925.00		
POWELL	O H	Zip Code	Received at Funda			
I COVVICION	о н	43065	/ES	X vo		

Page Total \$ 2,986.83

^{*} Required for contributions form individual over \$100 to statewide and General Assembly candidates. IF contributor is self-employed, occupaton rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]

In-Kind Contributions Received

Prescribed by Secretary of State 2/01

		<u> </u>				
Name of Committee in Full CTTIZENS FOR RANKIN						
Full Name of Contributor	Employer, Occ	upation, Labor Organization *	Registration Number, if PAC			
SAIA & PIATT, PUL			negistration number, in 1716			
Street Address	Description of	Item or Service	M D Y Fair Market Value			
713 S. FRONT STREET	INVITATIONS		0 9 2 1 0 5 46.50			
City	State Zip Code		Received at Fundraising Event?			
COLUMBUS	O H 43215		YES NO			
Full Name of Contributor	Employer, Occ	upation, Labor Organization *	Registration Number, if PAC			
SAIA & PIATT, PLL						
Street Address	Description of	Item or Service	M D Y Fair Market Value			
713 S. FRONT STREET		POSTAGE	0 9 2 1 0 5 185.00			
City	State	Zip Code	Received at Fundraising Event?			
COLUMBUS	OH		YES 40			
Full Name of Contributor	Employer, Occ	upation, Labor Organization *	Registration Number, if PAC			
SAIA & PIATT, PLL						
Street Address		Item or Service	M D Y Fair Market Value			
713 S. FRONT STREET		D, BEVERAGES	0 9 2 1 0 5 691.00			
City	State	Zip Code	Received at Fundraising Event?			
COLUMBUS Full Name of Contributor	O H	43215	VES NO			
OHO DEMOCRATIC PARTY	Employer, Occ	upation, Labor Organization *	Registration Number, if PAC			
Street Address	Description of	Item or Service	M D Y Fair Market Value			
271 E. STATE STREET		CAL CONSULTANT	0 9 2 8 0 5 2,000.00			
City	State	Zip Code	Received at Fundraising Event?			
COLUMBUS	$O + \Pi$	1 .	YES NO			
Full Name of Contributor	4.0	upation, Labor Organization *	Registration Number, if PAC			
MARK DEMPSEY						
Street Address	Description of	Item or Service	M D Y Fair Market Value			
7305 WESTWOOD	FOC	D, BEVERAGES	0 8 3 1 0 5 55.00			
City	State	Zip Code	Received at Fundraising Event?			
COLUMBUS	O H	43212	YES NO			
Full Name of Contributor	Employer, Occ	upation, Labor Organization *	Registration Number, if PAC			
MEGAN DEMPSEY						
Street Address		Item or Service	M D Y Fair Market Value			
1305 WESTWOOD		D, BEVERAGES	0 8 3 1 0 5 55.00			
COLUMBUS	State	Zip Code 43212	Received at Fundraising Event?			
Full Name of Contributor	OH					
Full Name of Contributor	Employer, Occ	upation, Labor Organization *	Registration Number, if PAC			
Street Address	Description of	Item or Service	M D Y Fair Market Value			
otroce Address	Description of	item of Service	I all market value			
City	State	Zip Code	Received at Fundraising Event?			
,,	State	Zip code	VES NO			
Full Name of Contributor	Employer, Occ	upation, Labor Organization *	Registration Number, if PAC			
		·,				
Street Address	Description of	Item or Service	M D Y Fair Market Value			
	1					
City	State	Zip Code	Received at Fundraising Event?			
			res vo			

Page Total \$ 3,032.50

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